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TO: Examiner Lam S. Nguyen
Group Art Unit 2853
U.S. Patent and Trademark Office

FROM: Mark A. Williamson

RE: U.S. Patent Appln. No. 09/903,610

FAX NO.: (703) 872-9306

DATE: February 3, 2004 **NO. OF PAGES:** 16
(including cover page)

TIME: **SENT BY:**

MESSAGE

Per your request, attached is a copy of the Amendment filed January 5, 2004.

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Date 1/5/04
Mo. Day Yr.

Atty. Docket 01272-030465
Application No. 09/903,610

Sir:

Kindly acknowledge receipt of the accompanying:

Response to Official Action 10-3-03
 Check for \$ _____ (claims fee)
 Petition under 37 CFR 1.136 and Check for \$ _____
 Notice of Appeal and Check for \$ _____
 Information Disclosure Statement, PTO-1449 and _____
 Claim for priority and certified copies of _____
 Issue fee transmittal and Check for \$ _____
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by placing your receiving date stamp hereon and returning to deliverer.

Atty. M. A. WinkertDue Date 1/3/04Mo. Day Yr.
(Saturday)

MAIL STOP AF
AMENDMENT UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
GROUP ART UNIT 2853

In re Application of:

Docket No.: 01272.020465

TOSHIMORI MIYAKOSHI

Application No.: 09/903,610

Examiner: L. Nguyen

Filed: July 13, 2001

Group Art Unit: 2853

For: METHOD FOR CONTROLLING THE
DRIVE ENERGY OF AN INK JET
PRINT APPARATUS AND THE INK
JET PRINT APPARATUSDate: January 5, 2004
(Monday)

COMMISSIONER FOR PATENTS
MAIL STOP AF
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final Rejection in the above-identified application.

 No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	16	MINUS	20	= 0	x \$ 9 \$18	\$0.00
INDEP. CLAIMS	5	MINUS	5	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

 *Verified Statement claiming small entity status is enclosed, if not filed previously.

A check in the amount of \$____ is enclosed.

Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

A check in the amount of \$____ to cover the fee for a ____ month extension is enclosed.

A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our below-listed address.

Respectfully submitted,



Attorney for Applicant

Registration No. 33,628

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